

## Corres. and Mail

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& TRADEN AMEN	Docket No. 0020-4771P										
Application No. 09/701,303		Filing Date November 28, 2000		Examiner J. M. Spea	1	Art Unit 1615					
Applicant(s): Akil	niko SANO et a	ıl.									
Invention: CONTI	ROLLED RELE	ASE PREPAR	RATIONS HAY	VING MULTI-LAYE	R STRU	CTURE					
MS AF Commissioner for P.O. Box 1450 Alexandria, VA 22: Transmitted here	313-1450 with is an ame			• •							
The fee has been calculated and is transmitted as shown below.											
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate							
Total Claims		- 20 =		х							
Independent Claims		- 3 =		X							
Multiple Depend	dent Claims (ch	eck if applicabl	e)								
Other fee (pleas		450.00									
TOTAL ADDIT		450.00									
x Large Entity				Small Entity	,						
No additiona	al fee is require	d for this ame	ndment.								
	ge Deposit Acc			n the amount of \$		•					
X A check in the	ne amount of \$	450.00	to cover	the filing fee is end	losed.						
Payment by	credit card. Fo	orm PTO-2038	is attached.								
	r is hereby auth d below. A dup			Deposit Account Nenclosed.	10. 02	2-2448					
x Credit a	ny overpaymer	nt.									
x charge :	any additional fil	ing or application	n processing t	fees required under : Dated:		16 and 1.17.					
John W. Bailey Attorney Reg. N				Dated							
BIRCH, STEW 8110 Gatehous Suite 100 East		H & BIRCH, LI	LP								
P.O. Box 747 Falls Church, V (703) 205-8000		0747									

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of	r 1995, no person are required to	respond to a collection of information unless it displays a valid OMB control number.										
Effective on 12/08		Complete if Known										
Fees pursuant to the Consolidated Appro	Application Number		09/701,303									
FEE TRANS	1 mily Date		November 28, 2000									
For FY 2	First Named Inv		Akihiko SANO									
			J. M. Spear									
Applicant claims small entity sta	Art Unit 1615											
TOTAL AMOUNT OF PAYMENT	Attorney Docket No. 0020-4771P											
METHOD OF PAYMENT (check all that apply)												
X Check Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP												
			ed to: (check	all that apply)								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee												
X Charge any additional fee(s) or underpayment of X Credit any overpayments												
fee(s) under 37 CFR	1.16 and 1.17											
	YAMINATION FEES											
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES												
	Small Entity	Small Entity			:-1 (A)							
Application Type Fee (			Fee (\$)	Fee (\$)	Fees Paid (\$)							
Utility 300			200	100								
Design 200			130	65								
Plant 200			160	80								
Reissue 300			600	300								
Provisional 200	) 100 0	0	0	0								
2. EXCESS CLAIM FEES Small Entit												
Fee Description Each claim over 20 (including Reis	50	25										
Each independent claim over 3 (inc	200	100										
Multiple dependent claims	g				360	180						
Total Claims Extra Claims				Itiple Depende	ent Claims							
	- 20 = x = =		Fee		ee Paid (\$)							
						_						
Indep. Claims Extra Claims	Fee (\$) Fee	Paid (\$)										
3 = x =												
3. APPLICATION SIZE FEE												
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50												
sheets or fraction thereof. See	35 U.S.C. 41(a)(1)(G) and	37 CFR 1.16(s).	ioi sinan ciii	inty) for cacif ac	ditional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)												
- 100 = /50 (round up to a whole number) x =												
4. OTHER FEE(S)  Fees Paid (\$)												
Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00												
SUBMITTED BY												
Registration No. (Attorney/Agent) 32,881 Telephone (703) 205-80												
Name (Print/Type) John W. Bailey Date JUL 6 2005												